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Apr 21. 2009
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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

Plaintiff(s)

MOHAMMED SHAFI UDDIN

v.

Defendant(s) *EVANSTON*

*NORTHWESTERN HOSPITAL
AND TRITON COLLEGE*

COMPLAINT

**09CV2416
JUDGE DOW
MAG. JUDGE SCHENKIER**

DOCUMENTS ARE ATTACHED

DOCKETED

APR 22 2009

APR 22, 2009

1

From:
Mohammed Shafiuddin
Apt# 2RR, 4844 Butterfield Road,
Hillside, IL 60162
Phone# 312-714-9744
Email: shafichicago@yahoo.com

To,
The Judge,
U.S. District Court,
Chicago, IL 60604

SUB: Requesting justice for being mentally tortured, racially discriminated and harassed.

Respected Sir/Madam,

My name is Mohammed Shafiuddin, and I was the student of Radiology Technology program at Triton College, River Grove, IL-60171.

During the spring 2008 semester, I have been mentally tortured, racially discriminated, harassed and emotionally hurt by the Clinical Instructor and her associates at Evanston Northshore Hospital, formerly known as Evanston Northwestern Hospital, Evanston, IL. Catherine Lekostaj (Program coordinator, Triton College) has assigned me to the above mentioned hospital as my clinical site.

I have passed all the required exams at the college and also at the clinical site. I also have the entire document that proves that I have pass all the required exams. Upon passing all the required exams, I have been given a failed grade in one of the class (RAS160), this has cost me at least 3 years of my time, money and effort, that I have put into this education, and also put me one and half year behind in the program. Even today the harsh treatment of the Northwestern Hospital haunts me and causing mental depression. And also Triton College and Evanston Northwestern Hospital has created an impression and image that education is not based on the student's successful hard work and talent, but based on student's religious practice and student's appearance, thus discriminating and politicizing the education.

I have contacted in this regard to Catherine Lekostaj (Program Coordinator), Cheryl Antonich (Dean of Triton College), and Dr. Nicholas Akinkuoye (VP of Triton College). All this Triton's officials has said that they have investigated my request and in conclusion they all have supported each others decision, and did not considered the documented fact that proves, that I have pass all the required exams for the class(RAS160) both college part and clinical part.

I have requested to Dean and Vice-President of Triton College and they have denied giving me the written copy of their investigation and decision in this matter.

I am here along with this letter enclosing all the documents that proves that I have pass all the four required exams at the clinical site, and also the 5 page document that partly explains the harassment, discrimination, torture and pressure I have put through at Evanston Northwestern Hospital.

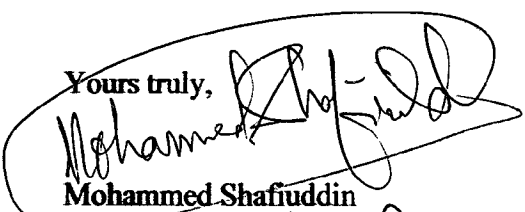
Triton College has nothing to support their decision to fail me. Triton College is using its power to fail me and thus I am oppressed by Triton College's power.

The copies of the documents I am enclosing here are also previously submitted to the above mentioned Triton's officials.

I am mentally depressed, lost time and money. Therefore I would like to get paid for the damages I am suffering, caused by Evanston Northwestern Hospital, its employees and the Triton College.

Thanking you,

Yours truly,


Mohammed Shafiuddin

Date: 4-21-09

From:
Mohammed Shafiuddin
4844 Butterfield Road.
Hillside, IL 60162.
Phone# (312) 714-9744
Email: shafichicago@yahoo.com

To:
The Judge
U.S. District Court,
Chicago, IL 60604

My name is Mohammed Shafiuddin, and I am the student of Radiology Technology program at Triton College, River Grove, IL. I am also actively involved in helping Mr. Sean Sullivan, Vice President of Business Services, in marketing for Triton College.

I have been harassed, mentally tortured, racially discriminated by Jennifer Szeszol, clinical instructor of Triton College at Evanston Northwestern Hospital, and she intentionally failed me in the semester. Here I am writing this letter with a hope and in the light to find justice, and Catherine Lekostaj, Director for Radiology Technology program at Triton college, should allow me to continue the program through this summer (2008).

Catherine Lekostaj has assigned me to Evanston Northwestern Hospital (ENH), as a clinical site. Jennifer Szeszol is the clinical instructor appointed by Triton College, at this hospital. Jennifer has two other friends working in the same department and they are Nancy Ramirez and Theresa Chan. Later after few months there was another newly hired employee whose name is Donald Goldberg joined the above mentioned team.

I have notified to Catherine in advance about the Jennifer's harsh treatment towards me and that Jennifer will fail me regardless of my good and successful performance. On April 24, 2008, I have completed two competency exams with Sue the technologist and Sue have passed me in the exam for my successful performance. I have told Jennifer about my success and ask her to give me the evaluation form, this is the form need to be filled out by the technologist who is grading the exam or competency, and Jennifer gave me the form that day to be filled out by Sue. Sue have filled out the form and signed the form. After that week has passed, Jennifer called me in her office and lied to me by telling "I have told you last week that I need to watch you and grade you for competency, and I am not going to accept this". If this was true, Jennifer should not have given me the evaluation forms, and should not have waited for one week to deny me for the exam I have already passed. Jennifer was not being fair for not accepting my competency after I have passed, therefore I have questioned her that why she did not tell me on the day I took the

competency exam, or while she given out the evaluating forms, and why she waited for a week to tell me that she will not accept the exams? She did not have the answer and was paused, but I know the answer and the fact that Jennifer could not find anything else strong to fail me. And there was very little time left for the semester to end and to complete the exam. Therefore she was very aggressive and would like to do anything to fail me. Finally she did fail me. Earlier, I have complained and requested to my program coordinator "Catherine Lekostaj", to investigate this matter and transfer me to another site, but Catherine never took any action and instead she believed what Jennifer have told her.

Being a freshman year student I was very good at my performance. There was a situation when Jennifer took the wrist x-ray and it needed to be repeated, because Jennifer didn't performed correctly. Therefore Kim the supervisor assigned me with another technologist Angie to repeat the x-ray. Angie noticed that it is difficult task and ask me to try it, and I tried it. The result was very good and was praised by Angie and the supervisor. I am just mentioning this one incident to acknowledge my successful performance.

On April 04, 2008 in Room# 4, I took an Abdomen x-ray. Jennifer slipped her tongue, and praised me for performing a good job, then in the evening of the same day Jennifer made a remark and stated in my biweekly report, that I am not aware of the x-ray equipment and need practice. This is not true, because how I am able to do the job of taking acceptable x-rays daily without any complaints from any supervisor, if I am not aware of the equipment and its function. Therefore Jennifer wrote this remark just to build a case against me, because how could she praise me for performing a good job, and then at the same time makes a remark that I need a practice?

And on the same day April 04, 2008 while Jennifer was doing my biweekly, Jennifer warned me not to read the school text books during the working or training hours, and she also said that she will tell Krzysztof Karteczka the other student (including me there were only two students in this semester) the same thing. Few weeks have been passed and I have noticed Krzysztof is reading his text books, and I have asked him that if Jennifer has mention him about not reading the text books? Krzysztof responded saying that he has the exam and he need to study. It has been a month and I still notice krzysztof reading his text books and other materials while he is working with Jennifer, for which Jennifer has put restrictions. Then I have asked Jennifer that why she doesn't allow me to read my text books, but she let the other student Krzysztof to read his text books. Jennifer responded to me saying that "you don't have to worry about the other student (Krzysztof)". I was worried because this is related to me, as I was being treated differently from the other student. This shows how discriminative Jennifer is; she only restricted me and not for the other student. From this situation one can clearly understand that Jennifer expects me to fail academically, so that I will be removed from this hospital site. But I have passed academically, and Jennifer has no option but to fail me intentionally at my clinical work, to hurt me and remove me from the site. These are few situations which acknowledge how I have been pressured and discriminated by my clinical instructor Jennifer.

As I am sincere, hard working, never miss a day and honest to my work, Jennifer could not find anything to make a remark about me, therefore she use this word "Constructive Criticism". Jennifer complains that I don't accept the criticism as a constructive criticism. Jennifer takes the help of her friends Nancy, Terry, and Donald Goldberg, who works along with Jennifer. These

friends were falsely criticizing me, which was heart breaking and emotionally hurting me. Jennifer to support her friends and in an ambition to fail me, has converted her friends' false criticism to constructive criticism. I have mentioned Jennifer this is a destructive criticism not a constructive criticism, because this criticism is not based on the facts and is not true, and I need to be educated not criticized.

Jennifer once asks me to write something bad about this one technologist "Sofia". Jennifer said that she has gathered complaints from other people against Sofia and she wants me to say something bad about her, so that she can build a case against her. And I have refused to do so because I was just a freshman and I have not seen Sofia doing anything wrong.

Now from the beginning as a student here, Terry and Jennifer were always questioning about my religious beliefs like wearing cap or about my beard in a funny manner. Terry once made a remark and said "how can you wear a cap like that all day, I would have feel very uncomfortable and sweat, if I have to wear it, and I never can be a Muslini". Jennifer had a problem with my religious beard, because she was telling me to find something to cover which is not required now. There are many other comments about my religious belief, I have just mentioned few here.

If I am trying to find something while helping the assigned technologist, who is busy with the patient and this is the first time I am looking for the item, which I have never told about its location before, and upon requesting the supervisor Terry to let me know where or what cabinet this item will be available. She had always responded with very nasty attitude and very unprofessional manner and made me feel like I never want to ask her help again. Once, Terry intentionally asks me to help the doctor while the technologist "Sofia" was not present during the esophogram procedure. Then Terry went on to complain Jennifer, that I am helping the doctor in performing the procedure without the presence of the technologist. Jennifer along with Terry came to witness the situation, so that Jennifer can add this situation to my list which Jennifer is making to fail me. But I was not aware and I was never told that I am not suppose to help the doctor without the presence of technologist, and supervisor Terry was aware of this fact and knowingly asked me to help the doctor while technologist is not present, and on the other hand she went to complain Jennifer about it. If this was the case, that I cannot help the doctor in the absence of technologist, and then Terry knowingly should not have told me to go help the doctor, instead she should have stepped in the room to help the doctor. This way Terry was helping Jennifer to fulfill her ambition of failing me.

There are many other situation in which Terry has lied to build the case against me, here is another situation occurred on April 22, 2008; in this situation I have asked Nancy that I want to do the competency (Exam), and Nancy suppose to grade me after completing the exam on the patient along with the doctor. Nancy has agreed to grade my competency, I have set up the room before starting the procedure and Nancy checked the setup and said she is satisfied with the setup and asks me to get the patient and start the exam along with the doctor. Therefore I went and got the patient, verified patient's name and date of birth, last menstrual period and I have asked if she is pregnant, and then took the patient history and explained the procedure to the patient and put a carbon crystals and barium pills into the medicine cups. Then after telling the patient I went and got the doctor. Doctor M. Gore came into the room along with me and started the procedure, Nancy left the room and Terry was grading me during the procedure. The patient was choking and doctor asks the patient if she want to vomit, in the mean time Terry stepped out, and I have

given the vomiting basin to the patient but patient has refused and told the doctor that she don't feel like vomiting, therefore I put the basin back into the drawer and then Terry walks into the room with a vomiting basin. At this time I told Terry and pointed out that the basin was already in the room, because from previous experiences with Terry I knew she is manipulating and trying to build the case against me, so that she can use this excuse of missing basin to fail me. But the basin was not missing and was available in the room; this was a defeat to Terry's plan to fail me. That is why I have explained Terry what happened while she stepped out and showed her that the basin was already in the room. But Terry lied to Jennifer anyway about the basin, and Jennifer accepted what Terry has said without further investigation, and thus Jennifer lost her credibility. Jennifer has conducted a meeting with me along with Nancy, and Jennifer failed me in this exam. My eyes have become red from crying during this meeting. I was crying because they falsely failed me and I was able to realize that Jennifer is intending and will fail me in this semester which will be ending in a month, and in order to be protected from further damage of the cost of my money and time, I have requested Jennifer to fail me now, instead of her waiting for one month from now till the end of semester to fail me.

I have worked with Nancy several times and she always picks on me over little things and then exaggerates while complaining to Jennifer. There was another incidence after the procedure in Room# 10 on May 08, 2008, and there was also an observer present at that time, I don't want to mention the name of the observer, but I told the observer to watch for the Nancy's worst treatment towards me, that Nancy will make a big deal about closing the exam, that she will be complaining if I do or don't close the exam. Nancy came back after taking the patient to the waiting area, observer was also present and notice what I have said, Nancy started complaining that why I have not close the exam while she was gone, I responded to Nancy, that previously I was told not to do so and wait for the technologist verification. Then Nancy said that I have been here long enough to do so, if being here long enough will over rule the verification by technologist, and then this should have been previously mentioned. If I have did close the exam Nancy would have still be complaining, what I know from my previous experience with her, she still be worst and more complaining for doing so without her permission, and this is not even a big deal or mistake that need to be pointed. But in either situation she would like to build the case against me, so she exaggerates and complains to Jennifer. Jennifer without any further investigation had accepted what Nancy has said and uses this against me.

Donald Goldberg also known as DJ, who is also Jennifer's friend in her mission to fail me, Donald was in room# 10 because Jennifer will be testing him on the procedure. This day I was assigned to Room# 10 and DJ makes fun of my religion by being sarcastic and repeatedly asking me in a funny manner that "are you praying", even after I showed and told him that I am looking at my notes in the book and I am not praying. He tells me again that "looks like you praying".

There was another situation in which I was not assigned to work with DJ, but in Room# 17 DJ insisted me to help him and then asks me to position the patient for elbow x-ray, and I felt that DJ is trying to find some mistakes from me, so that he can help Jennifer to accomplish her mission to fail me. While I was still positioning the patient DJ rudely intrude in the process and position the patient and takes the x-ray. This x-ray turns out to be wrong because DJ did not position it correctly, and DJ needs to repeat this x-ray. DJ gets angry towards me for his mistake and repeats the x-ray. Then DJ complains to Jennifer in writing which I was not aware, until couple weeks after when Jennifer without further investigation rudely asks me to sign and accept

the complaint written by DJ. Jennifer refuses to further investigate and believed what DJ has written. I have noticed many times that when student is unable to position properly, they are explained and helped for positioning and do not get write up as Jennifer falsely did in my case. I understand if you write up for repeatedly doing the same mistake over again and again. But in my case Jennifer write me up for false allegation, which she never seen or without further investigation.

Not only this but there are many other situation like I have been pressured to sign my incorrect biweekly and I have also tortured by timing my work and setting an alarm by Robert Ballanger a technologist and Jennifer's friend, upon complaining to Jennifer, she has not taken any action. From all this incidents I can clearly see that the Jennifer is intending to fail me regardless of my successful performance.

There are many other situations in which I have suffered hardship. These are the only few situations I am mentioning here.

I have passed all my classes in this semester, and just because Jennifer intentionally failed me in the clinical, this makes me one year behind in my program and I can't afford to lose this one year. I have mentioned Jennifer's intention and requested to Catherine to transfer me to another hospital site. Catherine denied me to transfer me to another hospital.

In conclusion I have tortured, suffered emotionally and mentally. Jennifer as clinical instructor never personally evaluated upon receiving complaints against me. But she took those false allegations as a fact and the opportunity to fulfill her desire to fail me. Thus she has not conducted her job properly. The torture, hardship and stress that were given by Jennifer, Nancy and Terry still haunt me emotionally. Triton should change my grade to passing for this class RAS160, for which I have scored 82% in the written exam. Therefore I here request you to please investigate this matter and help me in getting justice. I am also willing to bring this matter publicly through news media, if this matter is not justified. Triton College has caused me mental depression, and I feel that upon continuing the program I might be judged and oppressed by the people of power at Triton College, not according to my performance.

Thanking you,

Yours truly,

Mohammed Shafiuddin

Date:

From:
Mohammed Shafiuddin
4844 Butterfield Road,
Hillside, IL – 60162
PH# (312) 714-9744
Email: shafichicago@yahoo.com

To,
Dr. Nicholas Akinkuoye
Vice-President
Triton College,
River Grove, IL.

REF: Requesting an investigation in regarding unfair treatment towards Triton's student,
Mohammed Shafiuddin.

Respected,
Dr. Nicholas Akinkuoye,

My name is Mohammed Shafiuddin, Triton's student of Radiology Technology program. You have asked me to contact Dean of Triton College before contacting you; therefore on June 09, 2008 I had the meeting with Dean of Triton College, Miss Cheryl Antonich, I have requested Cheryl to investigate this matter. Cheryl called me on June 13, 2008 and referred me to you (Vice President of Triton College Dr. Nicholas Akinkuoye), because she was not able to fairly evaluate and convince me.

Cheryl has investigated to an extent just to support her decision; Cheryl was not able to investigate why clinical instructor, Jennifer did not accept my passed competencies for the class of RAS160. I have pass the college part of this class RAS160 with 82%, and I have also passed the clinical part of this class, but Jennifer did not accepted and denied the documented fact that I have passed the required competencies for clinical, and thus Jennifer intentionally failed me in my clinical part of this class RAS160. It is important to analyze the discriminative nature of the Jennifer, a clinical instructor for Triton College at Evanston Northwestern Hospital, who intentionally failed me, before giving any credibility to Jennifer, Cheryl should have evaluated Jennifer's nature by looking at the documents which I am enclosing here and I have also presented these documents to Cheryl during the meeting, in which it is clarified that I have passed the 4 required competencies for class of RAS160 to pass this semester, for which reason Jennifer has failed me and Jennifer do not want to accept my passed competencies, this shows that how aggressive is Jennifer to fail me. I have questioned Cheryl during the phone conversation with her on June 13, 2208 that why Cheryl has not investigated the reason for Jennifer not accepting my passed competencies; Cheryl said that she has many other students' complaints to be resolved and Cheryl was not able to investigate about why Jennifer did not accept my passed competencies. Cheryl instead took Jennifer's criticism based on false allegations by Jennifer's friends that I was struggling to set up the room at the hospital, but I was not

struggling and I have requested to Jennifer to personally evaluate my performance and also to investigate these false allegations, but Jennifer did not consider my request and took all the false allegations as the fact to judge me.

Jennifer has claimed two main reasons to fail me, and they are (1) STRUGGLING IN ROOM SETUP (2) NOT PASSING 4 COMPETENCIES.

CLARIFICATION: The following clarifies that Jennifer is wrong in her claim to fail me:

- (1) STRUGGLING IN ROOM SETUP: Jennifer has criticized me that I am struggling in setting up the room based on the comments from five of her friends and they are also the employees of the same hospital; Donald, Christy and Robert are the three out of the five criticizing friends of Jennifer. I had assigned and worked only once with these three people. These persons' criticism towards me should not be accounted because of five reasons, and they are as follows:
- (1) Working few hours with these people is not enough to criticize.
 - (2) The mistakes I have criticized for was not repeated mistakes.
 - (3) The criticism was made by only 5 out of 21 employees, the rest 16 employees with whom I was assigned and worked most often has no complaints about my performance in setting up the room.
 - (4) Jennifer did not personally evaluate my performance, Jennifer judged based on false criticism made by her friends.
 - (5) Of course I am a student, and generally every student struggle to learn.

Nancy Ramirez and Theresa Chan's are the rest 2 other friends of Jennifer, whose false allegation and lies respectively is documented in an enclosed five page document.

- (2) NOT PASSING 4 COMPETENCIES: I am enclosing the copies of the documents showing that I have completed and passed all the 4 required competencies, and Jennifer did not accepted these documents, so that she can fail me. How can someone deny from accepting the documented proof? This shows that how Jennifer is aggressive and intends to fail me.

I am here enclosing all the documents, and I kindly request you to please consider my situation and give me the fair opportunity to grow as Triton's student.

Thanking you,

Yours truly,

Mohammed Shafiuddin
D/ June 23, 2008.

POINTS TO BE NOTED FROM THE ATTACHED DOCUMENTS

— PERFORMANCE EVALUATION DOCUMENT

Performance evaluation is the evaluation of the student's general performance by the clinical instructor. I have attached here the copy of my evaluation document for the midterm and the final. Jennifer Szeszol appointed by Triton College as my clinical instructor at Evanston Northwestern Hospital. Jennifer has done my evaluation for midterm on March 13, 2008 and for final on May 13, 2008. There was only 15 days of attendance between the period of midterm and final evaluation. According to the midterm evaluation document my performance was good and I have passed the evaluation. My performance was at "Meet Expectations" during the midterm evaluation, and for final evaluation which was after 15 days period, Jennifer jumped over the "Need Improvement" column and marked as "Unsatisfactory" without giving me the opportunity for improvement. This is not a fair evaluation because of the following reasons:

- (1) For a person with good mental and physical condition it takes more than 15 days to change from satisfied "Meet Expectation" to "Unsatisfied" performance.
- (2) The student should be given an opportunity to improve and can be marked for "Need Improvement" in the evaluation document, before marking the satisfied "Meet expectation" student to "Unsatisfactory" in 15 days period.
- (3) This evaluation was not self conducted by the instructor and was based the comments from others.

— COMPETENCY EVALUATION DOCUMENT

Competency evaluation is the evaluation of the student's self and practical ability to conduct the particular exam or procedure on the patient and the evaluation is conducted by the technologist. Jennifer mentioned in the "Final Performance Evaluation" document, that one of the reasons for her to fail me is that I have not completed at least 4 competencies. Jennifer is being unfair again by not accepting the fact and the truth, that I have performed and passed the 4 required competencies to pass the semester. I am here enclosing the copies of the "Competency Evaluation" documents signed by the technologists. These documents prove that I have passed the required competencies, and also conclude that how unfairly I was treated and failed upon my successful performance.

TRITON COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
EVALUATION OF AFFECTIVE OBJECTIVES
MIDTERM

Mohammed Shafiuddin
Student's Name
Evanson
Clinical Affiliate

3-12-08
Date

	Exceeds Expecta- tions	Meets Expecta- tions	Needs Improve- ment	Unsatisfac- tory
Attitude: accepts constructive criticism in a positive manner; uses criticism as a learning tool to improve skills; works well with others as a team player; shows interest in continuing to learn and improve in the clinical setting; interacts well with co-workers			✓	
Communications: demonstrates effective communication skills with co-workers and patients		✓		
Cooperation: works well with supervisors, staff and peers; adjusts to new tasks and changes in clinical area assignments; prioritizes developing situations in order to accommodate patients and the radiology department		✓		
Dependability: can be relied upon to perform and complete specific procedures; remains in assigned clinical areas; is self-confident, performs most previously learned tasks with indirect supervision, generally assumes responsibility for actions		✓		
Ethical Behavior: adheres to Hospital and School policies; conducts self professionally; adheres to ASRT Code of Ethics; respects patient confidentiality, realizes role concerning patient's right; demonstrates discretion; displays positive courteous attitude toward all patients	✓			
Initiative: displays enthusiasm in the clinical setting; applies self to assigned tasks, performs basic tasks without being told, seeks additional responsibilities, demonstrates confidence responsibilities	✓			
Professional Appearance: follows College and department dress code; presents a professional image in accordance with handbook		✓		
Professional Judgment: reacts effectively and professionally to stressful situations, makes appropriate independent decisions; demonstrates control under pressure; handles stressful situations; recognizes limitations - refers problems to appropriate supervisor		✓		
Punctuality: reports to clinical rotation promptly in the A.M. and upon returning from class/lunch; absent or tardy only under extenuating circumstances and with proper notification	✓			

Pass ☒ Fail _____ (3 or more categories marked Unsatisfactory)

Additional comments:

Mohammed needs to be more confident in his positioning, needs to take ^{criticism} constructive as a guide. Mohammed is improving, but I still feel he is nervous and makes mistakes during comp, needs to calm down.

Student Signature [Signature]

Date 3-13-08

Clinical Instructor Signature Jennifer Preszot

Date 3-12-08

TRITON COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
EVALUATION OF AFFECTIVE OBJECTIVES
FINAL

Mohammed Shafieuddin
Student's Name
Evans
Clinical Affiliate

5-13-08
Date

	Exceeds Expectations	Meets Expectations	Needs Improvement	Unsatisfactory
Attitude: accepts constructive criticism in a positive manner; uses criticism as a learning tool to improve skills; works well with others as a team player; shows interest in continuing to learn and improve in the clinical setting; interacts well with co-workers				✓
Communications: demonstrates effective communication skills with co-workers and patients				✓
Cooperation: works well with supervisors, staff and peers; adjusts to new tasks and changes in clinical area assignments; prioritizes developing situations in order to accommodate patients and the radiology department				✓
Dependability: can be relied upon to perform and complete specific procedures; remains in assigned clinical areas; is self-confident, performs most previously learned tasks with indirect supervision, generally assumes responsibility for actions				✓
Ethical Behavior: adheres to Hospital and School policies; conducts self professionally; adheres to ASRT Code of Ethics; respects patient confidentiality, realizes role concerning patient's right; demonstrates discretion; displays positive courteous attitude toward all patients		✓		
Initiative: displays enthusiasm in the clinical setting; applies self to assigned tasks, performs basic tasks without being told, seeks additional responsibilities, demonstrates confidence responsibilities		✓		
Professional Appearance: follows College and department dress code; presents a professional image in accordance with handbook		✓		
Professional Judgment: reacts effectively and professionally to stressful situations, makes appropriate independent decisions; demonstrates control under pressure; handles stressful situations; recognizes limitations - refers problems to appropriate supervisor				✓
Punctuality: reports to clinical rotation promptly in the A.M. and upon returning from class/lunch; absent or tardy only under extenuating circumstances and with proper notification		✓		

Pass _____ Fail ✓ (3 or more categories marked Unsatisfactory)

Additional comments

In his previous time clock, many issues have been brought to Mohammed's attention regarding not listening, improper room preparation and equipment.

Student Signature Refused to sign

Date _____

Clinical Instructor Signature

Jennifer Azezo

Date 5-13-08

M Front page

manipulation in addition to not completing the required 4 out of 7 competencies that are needed to pass the semester. Mohammed had been warned previously that if these problems were not improved that he would fail. Also he does not accept or utilize constructive criticism and has difficulty taking responsibility for his actions. He also did not take advantage of down time or improve on his knowledge of the rooms and equipment manipulation even though he was instructed to do this previously several times. Unfortunately I have not seen improvement of the issues mentioned above.

STUDENT EVALUATION • **Portable Chest**Student Name: Mohammed Shafiuddin

*This evaluation is to determine the student's
competency when performing specific radiographic*

PROCEDURE GRADE	COMPETENCY GRADE

COMPETENCY**Preparation**

The student:

- | | | |
|--------------------------------------|----|---|
| <input checked="" type="radio"/> Yes | No | 1. Identifies the correct patient and examination according to the requisition |
| <input checked="" type="radio"/> Yes | No | 2. Locates and drives the portable unit to the patient's room |
| <input checked="" type="radio"/> Yes | No | 3. Politely asks the patient's visitors to wait outside the room until the examination is complete |
| <input checked="" type="radio"/> Yes | No | 4. Explains the examination in terms the patient fully understands and properly communicates with the patient throughout the examination |
| <input checked="" type="radio"/> Yes | No | 5. Obtains and documents the patient's history before the examination |
| <input checked="" type="radio"/> Yes | No | 6. Asks female patients of childbearing age the date of their last menstrual period and about the possibility of pregnancy, and has them sign pregnancy consent forms |
| <input checked="" type="radio"/> Yes | No | 7. Removes all obscuring objects (snaps, jewelry, personal belongings, etc.) so as <i>not</i> to produce radiographic artifacts |
| <input checked="" type="radio"/> Yes | No | 8. Respects the patient's modesty and provides ample comfort for the patient |
| <input checked="" type="radio"/> Yes | No | 9. Examines the room and adjusts any furniture before bringing in the portable unit |
| <input checked="" type="radio"/> Yes | No | 10. Examines the patient and selects the appropriate cassette, according to the patient's size and examination |
| <input checked="" type="radio"/> Yes | No | 11. Adjusts the patient into the erect or supine position, as appropriate |
| <input checked="" type="radio"/> Yes | No | 12. Is able to manipulate portable radiographic equipment with ease, positions it at the patient's bedside, and centers the CR to the film |
| <input checked="" type="radio"/> Yes | No | 13. Adjusts the tube to the proper source-to-image receptor distance (SID) |

Positioning for a Portable Chest

The student:

- | | | |
|--------------------------------------|----|--|
| <input checked="" type="radio"/> Yes | No | 1. Places the cassette behind the patient lengthwise (LW) or crosswise (CW), depending on the patient's build, with the flash at the top, adjusting so that the film will include all the necessary anatomy, and ensuring that the upper border of the film is 1-2 in. above the patient's shoulders |
| <input checked="" type="radio"/> Yes | No | 2. Centers the CR to the midsagittal plane |
| <input checked="" type="radio"/> Yes | No | 3. Directs the CR perpendicularly to the level of the sixth thoracic vertebra, unless it is necessary to angle according to the patient's position |

Details

The student:

- | | | |
|--------------------------------------|--------------------------------------|---|
| <input checked="" type="radio"/> Yes | No | 1. Instills confidence in the patient by exhibiting self-confidence throughout the examination |
| <input checked="" type="radio"/> Yes | No | 2. Places a lead marker in the appropriate area of the cassette or Bucky (top/bottom/anteriorly/laterally), where it will be visualized on the finished radiograph, on the proper anatomical side (R/L), and in the appropriate position (face up/face down), depending on the patient's position |
| (Yes)(No) | <input checked="" type="radio"/> Yes | No 3. Provides radiation protection (shield) for the patient, self, and others |

continued

STUDENT EVALUATION • **Portable Chest** (continued)**PROCEDURE** **COMPETENCY**

(Yes)(No)	<input checked="" type="radio"/> Yes No	4. Applies proper collimation and makes adjustments as necessary
(Yes)(No)	<input checked="" type="radio"/> Yes No	5. Sets the proper technique (kilovolts-peak [kVp], mA, time) and makes adjustments as necessary
(Yes)(No)	<input checked="" type="radio"/> Yes No	6. Exposes the film after, while standing at least 6 ft. away, telling the patient to hold still and giving the patient proper breathing instructions (inspiration) <i>for each projection</i>
(Yes)(No)	<input checked="" type="radio"/> Yes No	7. Provides each radiograph with the proper patient identification (flash), and processes each film (image) without difficulty
(Yes)(No)	<input checked="" type="radio"/> Yes No	8. Properly completes the examination by filling out all necessary paperwork and entering the examination in the computer.
(Yes)(No)	<input checked="" type="radio"/> Yes No	9. Exhibits the ability to adapt to new and difficult situations if and when necessary
(Yes)(No)	<input checked="" type="radio"/> Yes No	10. Accepts constructive criticism and uses it to his or her advantage
(Yes)(No)	<input checked="" type="radio"/> Yes No	11. Leaves the room neat and puts things back the way they were before he or she entered
(Yes)(No)	<input checked="" type="radio"/> Yes No	12. Completes the examination within a reasonable time frame
(Yes)(No)	<input checked="" type="radio"/> Yes No	13. Returns the portable unit to the proper location and charges it as needed

Radiographic Film Quality

The student is able to critique his or her radiographs as to whether they demonstrate:

(Yes)(No)	<input checked="" type="radio"/> Yes No	1. Proper technique/optimal density
(Yes)(No)	<input checked="" type="radio"/> Yes No	2. Enhanced detail, without evidence of motion and without any visible artifacts
(Yes)(No)	<input checked="" type="radio"/> Yes No	3. Proper positioning (all anatomy included, evidence of proper centering/alignment, etc.)
(Yes)(No)	<input checked="" type="radio"/> Yes No	4. Proper marker placement
(Yes)(No)	<input checked="" type="radio"/> Yes No	5. Evidence of proper collimation and radiation protection
(Yes)(No)	<input checked="" type="radio"/> Yes No	6. Long vs. short scale of contrast

Chest Anatomy

The student is able to identify:

(Yes)(No)	<input checked="" type="radio"/> Yes No	1. Apices
(Yes)(No)	<input checked="" type="radio"/> Yes No	2. Scapula
(Yes)(No)	<input checked="" type="radio"/> Yes No	3. Ribs
(Yes)(No)	<input checked="" type="radio"/> Yes No	4. Thoracic spine
(Yes)(No)	<input checked="" type="radio"/> Yes No	5. Diaphragm
(Yes)(No)	<input checked="" type="radio"/> Yes No	6. Bases
(Yes)(No)	<input checked="" type="radio"/> Yes No	7. Costophrenic angles
(Yes)(No)	<input checked="" type="radio"/> Yes No	8. Acromioclavicular joints
(Yes)(No)	<input checked="" type="radio"/> Yes No	9. Trachea
(Yes)(No)	<input checked="" type="radio"/> Yes No	10. Hilum
(Yes)(No)	<input checked="" type="radio"/> Yes No	11. Heart
(Yes)(No)	<input checked="" type="radio"/> Yes No	12. Mediastinum
(Yes)(No)	<input checked="" type="radio"/> Yes No	13. Clavicles
(Yes)(No)	<input checked="" type="radio"/> Yes No	14. Sternoclavicular joints
(Yes)(No)	<input checked="" type="radio"/> Yes <input checked="" type="radio"/> No	15. Aortic knob/arch
(Yes)(No)	<input checked="" type="radio"/> Yes No	16. Humeral head
(Yes)(No)	<input checked="" type="radio"/> Yes <input checked="" type="radio"/> No	17. Distal cervical spine
(Yes)(No)	<input checked="" type="radio"/> Yes No	18. Obvious pathology

Patient Information:

Name/Age: _____

STUDENT EVALUATION • **Portable Chest** (continued)

Medical Record No.: _____

Ability to Cooperate: _____

Condition/Pathology: _____

Technical Factors Used: _____

REMARKS:

Procedure Evaluator Signature: _____

Robert Bellanger

Date: _____

2-7-08

Competency Evaluator Signature: _____

Jennifer Agostol

Date: _____

2-21-08

STUDENT EVALUATION • Double Contrast

Gastrointestinal Series

Student Name: Mohammed Shafiq

Purpose of this evaluation is to determine the student's competency level when performing specific radiographic examinations.

PROCEDURE
GRADECOMPETENCY
GRADE

PROCEDURE | COMPETENCY

Preparation

The student:

- | | | | |
|------|--------------------------------------|-------------------------------------|---|
| No | <input checked="" type="radio"/> Yes | No | 1. Examines the radiographic room and cleans/straightens it before escorting the patient in |
| No | Yes | <input checked="" type="radio"/> No | 2. Has all equipment and supplies (patient gown, shield, markers, tape, 9 x 9 cassettes, lead aprons, blockers, hemostats, paddle, surgilube, proper contrast material, etc.) readily available before escorting the patient in, the Bucky drawer in the proper position, the monitor by the table, and the fluoro on |
| | | | Additional supplies: |
| | | | <i>- did not have proper era selected at control panel</i> |
| (No) | <input checked="" type="radio"/> Yes | No | 3. Prepares the contrast material without difficulty |
| No | Yes | No | 4. Is able to manipulate all radiographic equipment with ease, and centers the CR to the Bucky/film for all projections |
| No | Yes | No | 5. Adjusts the tube to the proper SID for each projection |
| No | Yes | No | 6. Selects cassettes of the appropriate sizes for all projections, according to the patient's size and examination |

Patient Preparation

The student:

- | | | | | |
|-------|------|--------------------------------------|----|--|
| Yes | No | <input checked="" type="radio"/> Yes | No | 1. Identifies the correct patient and examination according to the requisition while establishing a good rapport |
| (Yes) | (No) | Yes | No | 2. Obtains and documents the patient's history before the examination, including whether the patient ate before the examination and preparation instructions |
| Yes | No | Yes | No | 3. Thoroughly explains the examination in terms the patient fully understands and properly communicates with the patient throughout the examination - <i>pt had drowsy syndrome in this exam</i> |
| Yes | No | Yes | No | 4. Asks female patients of childbearing age the date of their last menstrual period and about the possibility of pregnancy, and has them sign pregnancy consent forms |
| Yes | No | <input checked="" type="radio"/> Yes | No | 5. Removes all obscuring objects (snaps, zippers, jewelry, belts, etc.) so as not to produce radiographic artifacts |
| Yes | No | <input checked="" type="radio"/> Yes | No | 6. Respects the patient's modesty and provides ample comfort for the patient while positioning him or her to begin the examination (double GI with or without small bowel series (SBS), and esophagrams and barium swallows—AP standing) - <i>did not have pt another gown for</i> |
| Yes | No | Yes | No | 7. Performs a scout radiograph when indicated <i>pts back to be covered</i> |

Tasks During Fluoroscopy

The student:

- | | | | | |
|-------|------|--------------------------------------|----|---|
| (Yes) | (No) | <input checked="" type="radio"/> Yes | No | 1. Relays the patient's history to the radiologist |
| (Yes) | (No) | Yes | No | 2. Assists the radiologist throughout the examination |

continued

PROCEDURE	COMPETENCY
-----------	------------

- | | | | |
|-----------|--------------------------------------|----|--|
| (Yes)(No) | <input checked="" type="radio"/> Yes | No | 3. Monitors, communicates with, and assists the patient throughout examination |
| (Yes)(No) | <input checked="" type="radio"/> Yes | No | 4. Takes charge of the examination after the radiologist departs |

Patient Positioning for a Double Contrast Upper GI**SUPINE/PRONE ABDOMEN** The student:

- | | | | | | |
|-----|-----|-----|-----|--|--|
| Yes | No | Yes | No | 1. Places the patient in the supine or prone position on the radiology table with arms at sides and without rotation | |
| N/A | Yes | No | Yes | No | 2. Places the film LW in the Bucky drawer, with the flash at the top |
| | Yes | No | Yes | No | 3. Centers the CR to the midsagittal plane of the body |
| | Yes | No | Yes | No | 4. Directs the CR perpendicularly at a level 2-3 in. above the iliac crest |

The student:

- | | | | | | |
|-----|-----|-----|-----|--|---|
| Yes | No | Yes | No | 1. Places the patient in the oblique position, at a 45° angle (40-70°) | |
| N/A | Yes | No | Yes | No | 2. Places the film LW in the Bucky drawer, with the flash at the top |
| | Yes | No | Yes | No | 3. Centers the CR between the spinous processes and the left iliac crest so that the stomach will be fully demonstrated on the radiograph |
| | Yes | No | Yes | No | 4. Centers the CR perpendicularly at a level 2-3 in. above the iliac crest |

RIGHT LATERAL

The student:

- | | | | | | |
|-----|-----|-----|-----|---|---|
| Yes | No | Yes | No | 1. Places the patient in the right lateral position, without rotation | |
| N/A | Yes | No | Yes | No | 2. Places the film LW in the Bucky drawer, with the flash at the top |
| | Yes | No | Yes | No | 3. Centers the CR midway between the midcoronal plane and the midline surface of the abdominal cavity |
| | Yes | No | Yes | No | 4. Centers the CR perpendicularly, to the level of L2, or if erect, to the level of the umbilicus |

Important Details

The student:

- | | | | | |
|-----------|--------------------------------------|--------------------------------------|----|--|
| Yes | No | <input checked="" type="radio"/> Yes | No | 1. Instills confidence in the patient by exhibiting self-confidence throughout examination |
| Yes | No | Yes | No | N/A 2. Places a lead marker in the appropriate area of the cassette (top/bottom/anteriorly/laterally), where it will be visualized on the radiograph, on the proper anatomical side (R/L), and in the proper position (face up/face down), depending on the patient's position |
| Yes | No | <input checked="" type="radio"/> Yes | No | 3. Provides radiation protection (shield) for the patient (when appropriate) and others (closes doors) |
| Yes | No | Yes | No | 4. Applies proper collimation and makes adjustments as necessary |
| Yes | No | Yes | No | 5. Properly measures the patient along the course of the CR |
| Yes | No | Yes | No | 6. Sets the proper techniques for fluoroscopy (kVp, mA, time) and for spot films, making adjustments as necessary |
| Yes | No | Yes | No | 7. Exposes the film after telling the patient to hold still and after giving proper breathing instructions (expiration) for each projection |
| (Yes)(No) | Yes | No | | 8. Provides each radiograph with the proper patient identification and processes each film (image) without difficulty |
| (Yes)(No) | <input checked="" type="radio"/> Yes | No | | 9. Properly completes the examination by filling out all necessary forms, entering the examination in the computer, having the film processed by appropriate staff members, answering any last-minute questions from the patient that he or she is finished |
| (Yes)(No) | <input checked="" type="radio"/> Yes | No | | 10. Exhibits the ability to adapt to new and difficult situations when necessary |
| Yes | No | <input checked="" type="radio"/> Yes | No | 11. Accepts constructive criticism and uses it to his or her advantage |
| (Yes)(No) | <input checked="" type="radio"/> Yes | No | | 12. Leaves the radiographic room neat and clean for the next examination |
| Yes | No | <input checked="" type="radio"/> Yes | No | 13. Completes the examination within a reasonable time frame |

STUDENT EVALUATION - Double Contrast Gastrointestinal Series (continued)

PROCEDURE | COMPETENCY

Radiographic Film Quality

The student is able to critique his or her radiographs as to whether they demonstrate:

- | | | | |
|-----------|-----|----|--|
| (Yes)(No) | Yes | No | 1. Proper technique/optimal density |
| (Yes)(No) | Yes | No | 2. Enhanced detail, without evidence of motion and without any visible artifacts |
| (Yes)(No) | Yes | No | 3. Proper positioning (all anatomy included, evidence of proper centering/alignment, etc.) |
| (Yes)(No) | Yes | No | 4. Proper marker placement |
| (Yes)(No) | Yes | No | 5. Evidence of proper collimation and radiation protection |
| (Yes)(No) | Yes | No | 6. Long vs. short scale of contrast |
| (Yes)(No) | Yes | No | 7. Image/projection identification and/or other identification |

Abdomen Anatomy

The student is able to identify:

- | | | | |
|-----------|-----|----|--|
| (Yes)(No) | Yes | No | 1. Diaphragm |
| (Yes)(No) | Yes | No | 2. Symphysis pubis |
| (Yes)(No) | Yes | No | 3. Iliac crest |
| (Yes)(No) | Yes | No | 4. Small vs. large bowel (gas) |
| (Yes)(No) | Yes | No | 5. Liver |
| (Yes)(No) | Yes | No | 6. Lesser and greater curvatures |
| (Yes)(No) | Yes | No | 7. Fundus |
| (Yes)(No) | Yes | No | 8. Body |
| (Yes)(No) | Yes | No | 9. Pylorus |
| (Yes)(No) | Yes | No | 10. Cardiac and pyloric antrums/sphincters |
| (Yes)(No) | Yes | No | 11. Duodenum |
| (Yes)(No) | Yes | No | 12. Rugal folds |
| (Yes)(No) | Yes | No | 13. Obvious pathology |

*fluoro only
no overhead
taken.*

Patient Information:

Name/Age: _____

Medical Record No.: _____

Ability to Cooperate: _____

Condition/Pathology: _____

Technical Factors Used: _____

COMMENTS:

- needs to wait for radiologist to give instructions!!

Procedure Evaluator Signature: _____

Date: 5-6-08

Competency Evaluator Signature: _____

Date: 5/6/08

STUDENT EVALUATION - Barium Swallow/Esophagram

~~Procedure: Barium Swallow, Esophagram~~
~~DATE: 4-24-08~~
 DATE: 4-24-08

Student Name:

Mohammed Shafiuddin

The objective of this evaluation is to determine the student's competency level when performing specific radiographic examinations.

PROCEDURE GRADE	COMPETENCY GRADE

PROCEDURE | COMPETENCY

Facility Preparation

(Yes) No (Yes) No
 Yes No Yes No

The student:

1. Examines the radiographic room and cleans/straightens it before escorting the patient in
 2. Has all equipment and supplies (patient gown, shield, markers, tape, 9 x 9 cassettes, lead aprons, blockers, hemostats, paddie, surlilube, proper contrast material, etc.) readily available before escorting the patient in, the Bucky drawer in the proper position, the monitor by the table, and the fluoro on
- Additional supplies:

(Yes) (No) (Yes) No
 Yes No Yes No

Yes No Yes No
 Yes No Yes No

3. Prepares the contrast material without difficulty
4. Is able to manipulate all radiographic equipment with ease, and centers the CR to the Bucky/film for all projections
5. Adjusts the tube to the proper SID for each projection
6. Selects cassettes of the appropriate sizes for all projections, according to the patient's size and examination

Patient Preparation

Yes No Yes No

(Yes) (No) Yes No

Yes No Yes No

Yes No Yes No

Yes No Yes No

Yes No Yes No

Yes No Yes No

The student:

1. Identifies the correct patient and examination according to the requisition while establishing a good rapport
2. Obtains and documents the patient's history before the examination, including whether the patient ate before the examination and preparation instructions
3. Thoroughly explains the examination in terms the patient fully understands and properly communicates with the patient throughout the examination
4. Asks female patients of childbearing age the date of their last menstrual period and about the possibility of pregnancy, and has them sign pregnancy consent forms
5. Removes all obscuring objects (snaps, zippers, jewelry, belts, etc.) so as not to produce radiographic artifacts
6. Respects the patient's modesty and provides ample comfort for the patient while positioning him or her to begin the examination (AP standing)
7. Performs a scout radiograph when indicated

Tasks During Fluoroscopy of a Barium Swallow/Esophagram

The student:

(Yes) (No) Yes No

(Yes) (No) Yes No

(Yes) (No) Yes No

(Yes) (No) Yes No

1. Relays the patient's history to the radiologist
2. Assists the radiologist throughout the examination
3. Monitors, communicates with, and assists the patient throughout the examination
4. Takes charge of the examination after the radiologist departs

continued

STUDENT EVALUATION • Barium Swallow/Esophagram (continued)

PROCEDURE	COMPETENCY	
Important Details		The student:
Yes No	<u>Yes</u> No	1. Instills confidence in the patient by exhibiting self-confidence throughout the examination
Yes No	<u>Yes</u> No	2. Places a lead marker in the appropriate area of the cassette or Bucky (top/bottom/anteriorly/laterally), where it will be visualized on the finished radiograph, on the proper anatomical side (R/L), and in the appropriate position (face up/face down), depending on the patient's position
Yes No	<u>Yes</u> No	3. Provides radiation protection (shield) for the patient (when appropriate), self, and others (closes doors)
Yes No	<u>Yes</u> No	4. Applies proper collimation and makes adjustments as necessary
Yes No	<u>Yes</u> No	5. Properly measures the patient along the course of the CR for each projection
Yes No	<u>Yes</u> No	6. Sets the proper techniques for fluoroscopy (kVp, mA, time) and all projections/spot films, making adjustments as necessary
Yes No	<u>Yes</u> No	7. Exposes the film after telling the patient to hold still and after giving the patient proper breathing instructions (expiration) for each projection
(Yes)(No)	<u>Yes</u> No	8. Provides each radiograph with the proper patient identification (flash), and processes each film (image) without difficulty
(Yes)(No)	<u>Yes</u> No	9. Properly completes the examination by filling out all necessary paperwork, entering the examination in the computer, having the films checked by the appropriate staff members, answering any last-minute questions, and informing the patient that he or she is finished
(Yes)(No)	<u>Yes</u> No	10. Exhibits the ability to adapt to new and difficult situations if and when necessary
Yes No	<u>Yes</u> No	11. Accepts constructive criticism and uses it to his or her advantage
(Yes)(No)	<u>Yes</u> No	12. Leaves the radiographic room neat and clean for the next examination
Yes No	<u>Yes</u> No	13. Completes the examination within a reasonable time frame

Radiographic Film Quality

		The student is able to critique his or her radiographs as to whether they demonstrate:
(Yes)(No)	<u>Yes</u> No	1. Proper technique/optimal density
(Yes)(No)	<u>Yes</u> No	2. Enhanced detail, without evidence of motion and without any visible artifacts
(Yes)(No)	<u>Yes</u> No	3. Proper positioning (all anatomy included, evidence of proper centering/alignment, etc.)
(Yes)(No)	<u>Yes</u> No	4. Proper marker placement
(Yes)(No)	<u>Yes</u> No	5. Evidence of proper collimation and radiation protection
(Yes)(No)	<u>Yes</u> No	6. Long vs. short scale of contrast
(Yes)(No)	<u>Yes</u> No	7. Image/projection identification and/or other identification

Abdomen Anatomy

		The student is able to identify:
(Yes)(No)	<u>Yes</u> No	1. Diaphragm
(Yes)(No)	<u>Yes</u> No	2. Symphysis pubis
(Yes)(No)	<u>Yes</u> No	3. Iliac crest
(Yes)(No)	<u>Yes</u> No	4. Small vs. large bowel (gas)
(Yes)(No)	<u>Yes</u> No	5. Liver
(Yes)(No)	<u>Yes</u> No	6. Esophagus
(Yes)(No)	<u>Yes</u> No	7. Lesser and greater curvatures
(Yes)(No)	<u>Yes</u> No	8. Fundus
(Yes)(No)	<u>Yes</u> No	9. Body

STUDENT EVALUATION • Barium Swallow/Esophagram (continued)

PROCEDURE	COMPETENCY		
(Yes) (No)	<u>Yes</u>	No	10. Pylorus
(Yes) (No)	<u>Yes</u>	No	11. Cardiac and pyloric antrums/sphincters
(Yes) (No)	<u>Yes</u>	No	12. Duodenum
(Yes) (No)	<u>Yes</u>	No	13. Rugal folds
(Yes) (No)	<u>Yes</u>	No	14. Obvious pathology

Patient Information:

Name/Age: _____

Medical Record No.: _____

Ability to Cooperate: _____

Condition/Pathology: _____

Technical Factors Used: _____

COMMENTS:

Procedure Evaluator Signature: _____

Date: _____

Competency Evaluator Signature: _____

Date: _____

STUDENT EVALUATION • **Small Bowel Series**

~~NO NAME, DO NOT WRITE~~
~~NAME, DO NOT WRITE~~

Student Name: Mohammed ShafiuddinDATE: 4-24-08

The objective of this evaluation is to determine the student's competency level when performing specific radiographic examinations.

PROCEDURE GRADE	COMPETENCY GRADE

PROCEDURE COMPETENCY**Facility Preparation**

The student:

Yes No Yes No

Yes No Yes No

1. Examines the radiographic room and cleans/straightens it before escorting the patient in

2. Has all equipment and supplies (patient gown, shield, markers, tape, proper contrast material, etc.) readily available before escorting the patient in
Additional supplies:

(Yes) (No) Yes No

Yes No Yes No

3. Prepares the contrast material without difficulty

4. Is able to manipulate all radiographic equipment with ease, and centers the CR to the Bucky/film for all projections

Yes No Yes No

Yes No Yes No

5. Adjusts the tube to the proper SID for each projection

6. Selects cassettes of the appropriate sizes for all projections, according to the patient's size and examination

Patient Preparation

The student:

Yes No Yes No

(Yes) (No) Yes No

Yes No Yes No

Yes No Yes No

Yes No Yes No

Yes No Yes No

Yes No Yes No

1. Identifies the correct patient and examination according to the requisition while establishing a good rapport

2. Obtains and documents the patient's history before the examination, including whether the patient ate before the examination and preparation instructions

3. Thoroughly explains the examination in terms the patient fully understands, emphasizing the timing sequence for small bowel radiography, and properly communicates with the patient throughout the examination

4. Asks female patients of childbearing age the date of their last menstrual period and about the possibility of pregnancy, and has them sign pregnancy consent forms

5. Removes all obscuring objects (snaps, zippers, jewelry, belts, etc.) so as not to produce radiographic artifacts

6. Respects the patient's modesty and provides ample comfort for the patient while positioning him or her to begin the examination

7. Performs a scout radiograph when indicated

Patient Positioning for a Small Bowel Series**IMMEDIATE SUPINE/PRONE ABDOMEN**

The student:

Yes No Yes No

Yes No Yes No

Yes No Yes No

Yes No Yes No

1. Places the patient in the supine or prone position on the radiographic table, with arms at sides and without rotation

2. Places the film LW in the Bucky drawer, with the flash at the bottom

3. Centers the CR to the midsagittal plane of the body

4. Directs the CR perpendicularly at a level 3 in. above the iliac crest

continued

PROCEDURE	COMPETENCY
-----------	------------

SUPINE/PRONE ABDOMEN AT SPECIFIED TIME INTERVALS

The student:

- | | | | | |
|-----|----|------------|----|--|
| Yes | No | Yes | No | 1. Places the patient in the supine or prone position on the radiographic table, with arms at sides and without rotation |
| Yes | No | <u>Yes</u> | No | 2. Places the film LW in the Bucky drawer, with the flash at the bottom |
| Yes | No | <u>Yes</u> | No | 3. Centers the CR to the midsagittal plane of the body |
| Yes | No | <u>Yes</u> | No | 4. Directs the CR perpendicularly to the iliac crest |

Important Details

The student:

- | | | | | |
|-----------|----|------------|----|---|
| Yes | No | <u>Yes</u> | No | 1. Instills confidence in the patient by exhibiting self-confidence throughout the examination |
| Yes | No | <u>Yes</u> | No | 2. Places a lead marker in the appropriate area of the cassette or Bucky (top/bottom/anteriorly/laterally), where it will be visualized on the finished radiograph, on the proper anatomical side (R/L), and in the appropriate position (face up/face down), depending on the patient's position |
| Yes | No | <u>Yes</u> | No | 3. Provides radiation protection (shield) for himself or herself, and others (closes doors) |
| Yes | No | <u>Yes</u> | No | 4. Applies proper collimation and makes adjustments as necessary |
| Yes | No | <u>Yes</u> | No | 5. Properly measures the patient along the course of the CR for each projection |
| Yes | No | <u>Yes</u> | No | 6. Sets the proper techniques for fluoroscopy (kVp, mA, time) and all projections/spot films, making adjustments as necessary |
| Yes | No | <u>Yes</u> | No | 7. Exposes the film after telling the patient to hold still and after giving the patient proper breathing instructions (expiration) for each projection |
| (Yes)(No) | | <u>Yes</u> | No | 8. Provides each radiograph with the proper patient identification (flash), and processes each film (image) without difficulty |
| (Yes)(No) | | <u>Yes</u> | No | 9. Properly completes the examination by filling out all necessary paperwork, entering the examination in the computer, having the films checked by the appropriate staff members, answering any last-minute questions, and informing the patient that he or she is finished |
| (Yes)(No) | | <u>Yes</u> | No | 10. Exhibits the ability to adapt to new and difficult situations if and when necessary |
| Yes | No | <u>Yes</u> | No | 11. Accepts constructive criticism and uses it to his or her advantage |
| (Yes)(No) | | <u>Yes</u> | No | 12. Leaves the radiographic room neat and clean for the next examination |
| Yes | No | <u>Yes</u> | No | 13. Completes the examination within a reasonable time frame |

Radiographic Film Quality

The student is able to critique his or her radiographs as to whether they demonstrate:

- | | | | |
|-----------|------------|----|--|
| (Yes)(No) | <u>Yes</u> | No | 1. Proper technique/optimal density |
| (Yes)(No) | <u>Yes</u> | No | 2. Enhanced detail, without evidence of motion and without any visible artifacts |
| (Yes)(No) | <u>Yes</u> | No | 3. Proper positioning (all anatomy included, evidence of proper centering/alignment, etc.) |
| (Yes)(No) | <u>Yes</u> | No | 4. Proper marker placement |
| (Yes)(No) | <u>Yes</u> | No | 5. Evidence of proper collimation and radiation protection |
| (Yes)(No) | <u>Yes</u> | No | 6. Long vs. short scale of contrast |
| (Yes)(No) | <u>Yes</u> | No | 7. Image/projection identification and/or other identification |

Abdomen Anatomy

The student is able to identify:

- | | | | |
|-----------|------------|----|-------------|
| (Yes)(No) | <u>Yes</u> | No | 1. Duodenum |
| (Yes)(No) | <u>Yes</u> | No | 2. Jejunum |

STUDENT EVALUATION • **Small Bowel Series** (continued)

COMPETENCY

<u>Yes</u>	No	3. Ileum
<u>Yes</u>	No	4. Diaphragm
<u>Yes</u>	No	5. Symphysis pubis
<u>Yes</u>	No	6. Iliac crest
<u>Yes</u>	No	7. Small vs. large bowel (gas)
<u>Yes</u>	No	8. Liver
<u>Yes</u>	No	9. Lesser and greater curvatures
<u>Yes</u>	No	10. Fundus
<u>Yes</u>	No	11. Body
<u>Yes</u>	No	12. Pylorus
<u>Yes</u>	No	13. Cardiac and pyloric antrums/sphincters
<u>Yes</u>	No	14. Rugal folds
<u>Yes</u>	No	15. Obvious pathology

Information:

Age: ~~18 years old~~Medical Record No.: ~~000000000~~

Cooperate: _____

Abnormal Pathology: _____

Clinical Factors Used: _____

Evaluators Signature: *Steven Miller*Date: 04-24-08

Competency Evaluator Signature: _____

Date: _____